LOUISIANA RECOVERY AUTHORITY HEALTH CARE RECOVERY AND REDESIGN JUNE 15, 2006

Resolution recommending the vision and strategy for achieving recovery and redesign of the health care systems in areas affected by Hurricanes Katrina and Rita and statewide.

WHEREAS, the Louisiana Recovery Authority (LRA) is charged with establishing policy and plans for the immediate and long-term recovery of regions of the state affected by Hurricanes Katrina and Rita.

WHEREAS, the LRA expects that recovery of the health care systems affected by disasters is expeditious, and that the rebuilt systems aim to deliver care in a more quality-driven, efficient and equitable manner.

WHEREAS, the LRA Support Foundation retained PricewaterhouseCoopers LLP to produce the *Report on Louisiana Healthcare Delivery and Financing System* (Report), which includes recommendations applicable to both the immediate and long-term recovery of the healthcare system in the hurricane impacted areas of Louisiana, as well as to the redesign of the overall statewide healthcare system.

WHEREAS, PricewaterhouseCoopers conducted extensive research and solicited the input of a broad range of stakeholders, including the LRA Public Health and Health Care Task Force, to ultimately produce the conclusions of the Report independently.

WHEREAS, the Report addresses three critical areas of healthcare recovery and redesign: emergency preparedness and disaster recovery; healthcare workforce and medical education needs, especially in areas of highest devastation; and design of a health system that will ensure equal access to quality care for all Louisianans.

WHEREAS, the LRA has already endorsed Recommendations 4, 5, 6, and 14 of the Report and its findings related to emergency response and disaster preparedness and immediate recovery in hurricane-affected areas.

WHEREAS, the Governor's Health Care Reform Panel recently concluded its work on improving equitable access to, affordability, and quality of health care statewide, promoting many principles in its work that are shared by the PricewaterhouseCoopers recommendations.

WHEREAS, restoring and improving the health care system in the areas most heavily affected by Hurricanes Katrina and Rita is directly connected to the structure of statewide healthcare financing and delivery systems, and the presence of sustainable, quality healthcare systems is fundamental to the recovery of neighborhoods and communities.

WHEREAS, the Louisiana Health Care Redesign Collaborative (Collaborative) emerged from the LRA Public Health and Health Care Task Force's priority to redesign a sustainable health care system and has grown under the leadership of Louisiana Department of Health and Hospitals Secretary Fred Cerise and United States Department of Health and Human Services Secretary Michael Leavitt.

WHEREAS, the Collaborative is charged with leading research, planning, and implementation of the recovery and redesign of the Southeast Louisiana health care system.

WHEREAS, post-hurricane conditions in Greater New Orleans offer an unparalleled opportunity to design and implement fundamental change in the financing and delivery of health care. Local experts, political authorities, and national experts recognize the urgency to create a more cost-effective, rational, quality-oriented system of care in that region, which will serve as a model for reform of locally oriented systems across the state and nation.

WHEREAS, authorities in Southwest Louisiana have demonstrated a strong commitment to redesigning the infrastructure and financing of their regional health care system to promote accessibility, efficiency and quality.

THEREFORE BE IT RESOLVED, that the Louisiana Recovery Authority does hereby endorse the PricewaterhouseCoopers' *Report on Louisiana Healthcare Delivery and Financing System* as the broad vision and blueprint for health care reform in Louisiana.

THEREFORE BE IT FURTHER RESOLVED THAT, the LRA will actively participate in the Louisiana Health Care Redesign Collaborative (Collaborative) in its efforts to develop a plan for implementation of a redesigned system of care in Greater New Orleans, consistent with the charge to demonstrate such innovative redesign issued by Secretary Leavitt and contained in the PricewaterhouseCoopers Report. The Collaborative will serve as the regional planning and implementation design group for long-term healthcare recovery in Southeast Louisiana, and will partner with local healthcare planning groups and initiatives. The LRA requests that the Collaborative provide regular reports on the progress of healthcare recovery in Southeast Louisiana. The Collaborative will review the PricewaterhouseCoopers Report's principles and recommendations, the findings of the Governor's Health Care Reform Panel, the resources committed by Secretary Leavitt, and the research and experience of Collaborative members for guidance in designing and working to implement a quality-driven, evidence-based health care system for Southeast Louisiana, including producing recommendations for comprehensive Medicaid Waiver and Medicare Demonstration proposals for that region by October 20, 2006.

THEREFORE BE IT FURTHER RESOLVED THAT, the LRA hereby requests that the DHH Secretary work in partnership with the LRA to convene an appropriate workgroup of local, state and federal leaders responsible for recovery of a sustainable, equitable system of quality care in Southwest Louisiana. The LRA will actively participate in the workgroup, which will serve as the regional planning and implementation design group for long-term healthcare recovery in the region, in collaboration with currently active local healthcare planning groups and initiatives. The LRA will make available all relevant recommendations and principles of the PricewaterhouseCoopers Report for consideration by the workgroup as guidance for redesign, and the workgroup will be asked to report regularly to the LRA on the progress of healthcare recovery in Southwest Louisiana.

THEREFORE BE IT FURTHER RESOLVED THAT, the LRA will remain engaged in the short-term recovery and long-term redesign of the health care systems impacted by the hurricanes of 2005 and throughout Louisiana through a subcommittee of the Board, to consist of board members chosen by the Chairman. This subcommittee, under the auspices of the LRA, will take whatever actions are necessary, assuring that sufficient staffing and consulting assistance are available as needed, to monitor, influence and drive the progress of reform in collaboration with the Governor and Legislature.

THEREFORE BE IT FURTHER RESOLVED THAT, the LRA Board of Directors thanks Dr. Mary Ella Sanders and the members of the Public Health and Health Care Task Force for their outstanding service, tremendous work effort, and commitment to the recovery of Louisiana.

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